



Town of Acton
Department of Public Health
472 Main Street, Acton, MA 01720
Phone: (978) 929-6632 Fax: (978) 929-6340
www.acton-ma.gov

ANNUAL INSPECTION HAZARDOUS MATERIALS PERMIT HOLDER

Facility Name: Village Detail Date 10/15/2014
Address: 101 Great Road
Type of Business: Detail Shop
Telephone: 978-263-0528 Email: Dvcarwash1@aol.com
Contact Person: Dan Viens Initial Inspection ☒ Re-Inspection ☐

Housekeeping:	Y	N	Comments
Area clean	✓		
Spills present		✓	
Appropriate material storage	✓		
Materials and wastes separate	✓		Tight tank
Cleanup materials available	✓		
Materials have secondary containment	✓		
Materials and wastes are labeled	✓		
Safety:			
Are MSDS sheets available on site	✓		
Employee personal protective equipment on site	✓		
Employees trained in Haz Mat handling	✓		
Emergency procedures posted	✓		
Site Management:			
Waste removed by licensed hauler	✓		Acton Concord Septic
Floor drains present in area of Haz Mat or waste	✓		Tight tank
Sinks present in area of Haz Mat or waste	✓		
Testing of septic system necessary		✓	
Does site plan on file reflect current arrangement	✓		
Any UST (underground storage tank) present	✓		
If UST present, is it alarmed	✓		

Action Items:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Re-inspection required? Yes ☐ No ☒

Reinspection Date: _____

Inspector Signature

Date

Facility Representative Signature

Date

D. Ho
10/16/14



ACTON BOARD OF HEALTH
APPLICATION for INITIAL HAZARDOUS MATERIALS PERMIT

Legal Name of Facility or Establishment: DV Auto Detailing LLC (DBA Village Detail)
Site Address: 101 Great Rd. Acton
Mailing Address: Same
Business Telephone: 978-263-0528
Corporate Officers: _____
Emergency Contact Person: Danny Viens
Emergency Telephone (Day): 508-846-8302 Emergency Telephone (Night): 508-846-8302
Type of Business: Auto Detailing

***Aquifer Location:**

- ☐ Well protection [1]
- ☐ Recharge protection [2]
- ☐ Aquifer protection [3]
- ☐ Watershed protection [4]

***Watershed District:**

- ☐ Fort Pond
- ☐ Nashoba Brook

**Maps available at Acton Health Department.*

Type(s) of Permits Needed:

- ☐ Remedial action following a discharge: [# 5 (discharge), # 6 (remediation)]
- ☐ Small or large scale generator (or > 100 kg/220 lbs/25 gal/mo: material or waste):
4 [generator: # 3 (mat.); # 1 (waste) (lrg.), # 2 (waste) (sm.)] [user: # 4 (mat.), # 7 (waste)]
- ☐ Storage (> 25 gal or lb) > 24 hrs: [# 8, # 9 (mat.), # 12, # 13 (waste)]
- ☐ Storage, use, generation of *extremely* hazardous material
- # 9 ☐ Storage of hazardous material or waste *overnight in trucks*
- ☐ Storage of prepackaged hazardous material (> 50 gal or lb): [# 10 (lrg.), # 11 (sm.)]
- ☐ UST storage of flammable or combustible materials
- ☐ Change in material stored
- ☐ Removal of underground tank

Requirements: *(Please ensure to include all required material before submission to Acton B.O.H)*

- ☐ Complete Non-Waste and Waste Information (sections A and B)
- ☒ M.S.D.S. for all chemicals listed on application
- ☒ Emergency or contingency plan for an accidental spill
- ☒ Site plan of premises showing areas where chemicals are stored (including tanks and piping), distance to roads or other buildings, unique slopes, arrow indicating north, and location of safety equipment. (see section C)
- ☒ Copies of disposal manifests (or other documents) showing proper disposal measures of all chemicals listed.
- ☐ Evidence of date(s) of purchase for all storage systems
- ☐ Copies of all relevant documentation (permits and citations)
- ☐ Certifying Endorsement

A. Hazardous Material (Non-Waste) Inventory Information

Complete the table below for all non-waste inventory. Use additional pages if necessary.


Chemical/Common Name	Max. Qty (at any one time)	Container Size (single largest container)	Location(s) (see section C)
Show Room Shine :	<u>6</u> gal. ____ lbs. ____ cu. . ft.	<u>5</u> gal. ____ lbs. ____ . ft.	A
Red Thunder	<u>7</u> gal. ____ lbs. ____ cu. . ft.	<u>5</u> gal. ____ lbs. ____ cu. . ft.	B
Clean's Shine	<u>6</u> gal. ____ lbs. ____ cu. . ft.	<u>5</u> gal. ____ lbs. ____ cu. . ft.	C
Appeal	<u>5</u> gal. ____ lbs. ____ cu. . ft.	<u>5</u> gal. ____ lbs. ____ cu. . ft.	D
XTRAX Liquid	<u>6</u> gal. ____ lbs. ____ cu. . ft.	<u>5</u> gal. ____ lbs. ____ cu. . ft.	E
STERLING	<u>6</u> gal. ____ lbs. ____ cu. . ft.	<u>5</u> gal. ____ lbs. ____ cu. . ft.	F

B. Hazardous Waste Inventory Information

(Hazardous Waste Generator Permit Application/Amendment)

Complete the table below for all waste inventory. Use additional pages if needed.

OVER →

Name of Hazardous Waste	Treatment/Disposal Method(s) (Definitions provided on bottom of page)	Max. Qty. (at any one time)	Annual Qty. Generated	Location(s) (see Section C)
N/A				
	____ Recycled on-site. ____ Treated on-site. ____ Shipped off-site for recycling/ treatment /disposal	____ gal. ____ lbs. ____ cu. ft.	____ gal. ____ lbs. ____ cu. . ft.	
	____ Recycled on-site. ____ Treated on-site. ____ Shipped off-site for recycling/treatment/disposal	____ gal. ____ lbs. ____ cu. . ft.	____ gal. ____ lbs. ____ cu. . ft.	
	____ Recycled on-site. ____ Treated on-site. ____ Shipped off-site for recycling/treatment/disposal	____ gal. ____ lbs. ____ cu. . ft.	____ gal. ____ lbs. ____ cu. . ft.	
	____ Recycled on-site. ____ Treated on-site. ____ Shipped off-site for recycling/treatment/disposal	____ gal. ____ lbs. ____ cu. . ft.	____ gal. ____ lbs. ____ cu. . ft.	
	____ Recycled on-site. ____ Treated on-site. ____ Shipped off-site for recycling/treatment/disposal	____ gal. ____ lbs. ____ cu. . ft.	____ gal. ____ lbs. ____ cu. . ft.	

Chem Name .	Max Qty anytime .	Container Size	Location
malco Aerosol Glass cleaner	12 (1 CASE)	Aerosol CAN (19oz)	G
Xtrax Conditioning Spray	12 (1 CASE)	Aerosol CAN (19oz)	H

Brook Rd Woods

C. Facility Site Plan/Storage Map

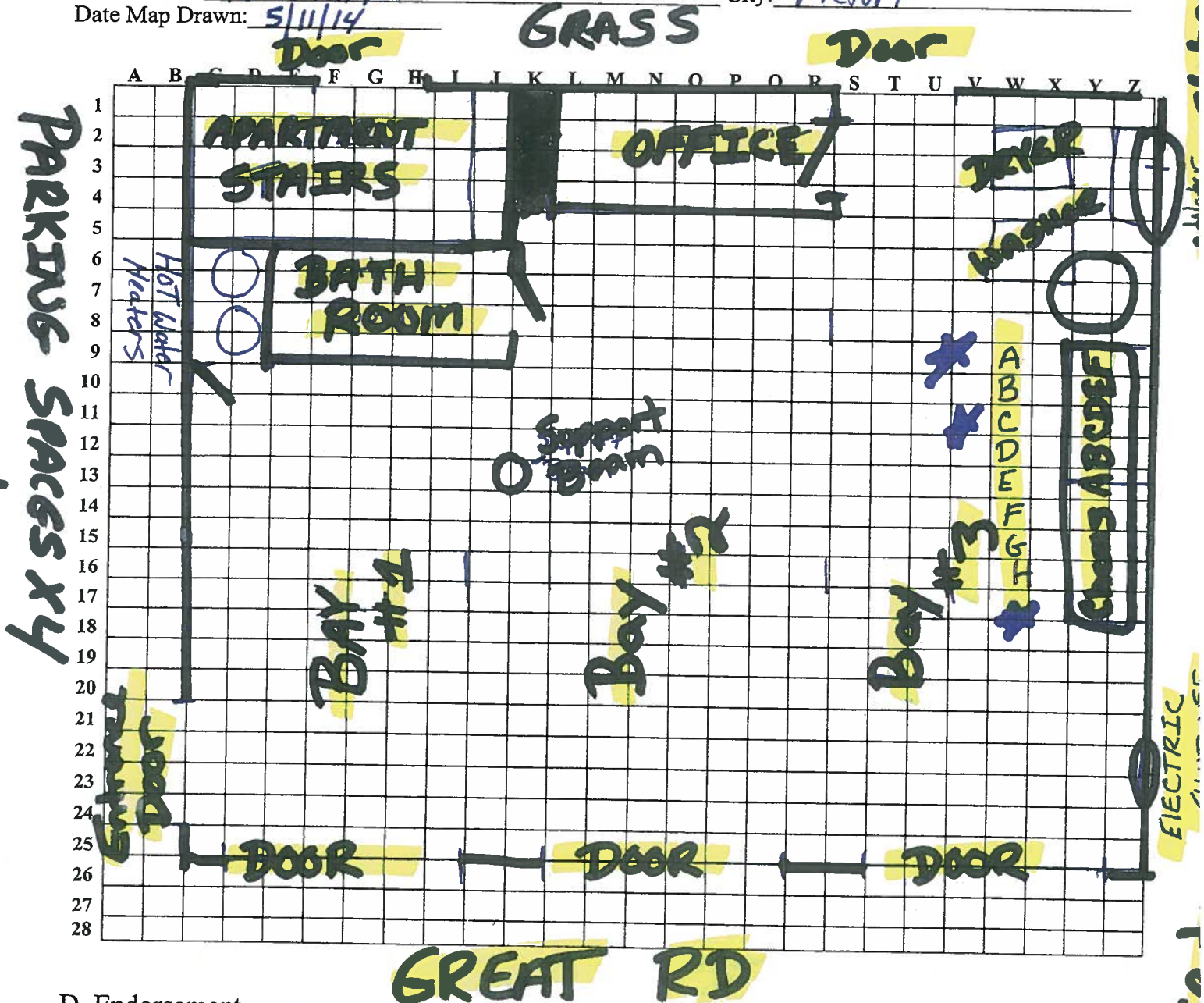
Prepare and submit with this Registration Form a simple site map which shows the following information:

- North direction • Street(s) adjacent to facility • Electrical, water, and gas shutoff valves
- Basic floor plan for each building containing hazardous materials/wastes which indicates building entrance(s) and hazardous material/waste storage locations (use grid locations or assign a code - A, B, C, etc. - to clearly identify each storage location for use in the above inventories).

Site Address: 101 Great Rd

City: Acton

Date Map Drawn: 5/11/14



D. Endorsement

I declare that the above information is true and correct to the best of my knowledge. I agree to comply with all applicable regulations regarding storage, handling, and disposal of hazardous materials and hazardous wastes.

Daniel P. Viens
Owner/Operator's Name (Print)

Dan P. Viens
Owner/Operator's Signature

5/16/14
Date

----- Do Not Complete Below This Line -----





Town of Acton
Department of Public Health
472 Main Street
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July 15, 2014

To: Acton Board of Health

From: Acton Health Department

Subject: Hazardous Material Application – Village Detail, 101 Great Road

Dear Board Members,

This letter is in regards to Village Detail, an existing automotive detail shop currently in business and located at 101 Great Road in Acton. The Acton Health Department discovered in 2013 that hazardous materials in excess of 25 gallons/lbs were present at Village Detail and further inquired with Dan for many months until the hazardous materials permit was submitted. Village Detail stores and uses many cleaners used for car cleaning. Village Detail has been designated categories of 4: "Hazardous Materials User" and 9: "Hazardous Materials Storer Small Industry," and is recommended by the Acton Health Department for permitting under the following conditions:

1. All liquid Hazardous Materials and Wastes shall be stored in a containment area capable of containing 110% of the largest volume stored in the containment area.
2. All Materials Safety Data Sheets (MSDSs) for the Hazardous Materials shall be maintained on site. MSDSs shall be reviewed with employees at the time of their employment and on an annual basis thereafter. MSDS must be made available to all employees upon request.
3. A Contingency Plan, including emergency contact numbers (Telephone numbers of owner, operator, etc.) and a sketch showing clearly all Hazardous Material and Waste locations shall be submitted and updated annually, to the Board of Health, Fire Department, Police Department, and Civil Defense.
4. Emergency procedures and local Emergency Response Telephone Numbers (Health, Fire, Police, D.E.P., Civil Defense, etc.) should a spill occur, shall be posted in clear view of all employees where Hazardous Materials or Wastes are used or stored.
6. Copies of either all invoices or manifests for any Hazardous Materials or Wastes, received or disposed, shall be submitted to the Board of Health annually.

7. All Hazardous Materials Containers shall be labeled and dated when filling first began.
8. Speedy Dry, or its equivalent, shall be kept in the storage area, in case of a Hazardous Materials or Wastes spill.
11. Protective equipment, including chemical resistant gloves, eye goggles and (rubber) boots, in addition to soap and water, shall be made available to all employees, at all times, in any Hazardous Materials or Waste storage or use area.
12. No Hazardous Materials or Wastes shall be discharged into a sink or toilet.
13. A safety eye wash station shall be installed where any Hazardous Materials are stored or used.
14. A fire extinguisher, containing an appropriate fire extinguishing agent, shall be placed in the Hazardous Materials Storage area.
15. No food or drink shall be stored or consumed in any area where Hazardous Materials are stored or used.
25. Prior to any new chemical or processes being used, the Board of Health shall be notified.
26. The operation of this facility shall be in compliance with all present and future regulations of E.P.A. and D.E.P. at all times. Nothing in this permit allows or requires non-compliance with all present and future applicable laws or regulations of the Federal or State Governments.

For more details, please see attached documentation from Daniel Viens of Village Detail.

Sincerely,

A handwritten signature in black ink, appearing to read 'Evan Carloni', with a stylized, flowing script.

Evan Carloni,
Public Health Inspector